## TRANSMITTAL FORM Filing Date First Named Inventor Art Unit Control of Pages in This Submission Application Number 09/809,405 Filing Date 3/15/2001 Frank Rademacher Art Unit 2621 Examiner Name Behrooz Senfi Attorney Docket Number 5327 - 010251

Total Number of Pages in	This Submission	5	Attorney Dock	cet Number	5327 - 0	10251					
ENCLOSURES (check all that apply)											
Fee Transmittal Form			Drawing(s)			After Allowance communication to TC					
Fee Attached			Licensing-related	l Papers		Appeal Communication to Board of Appeals and Interferences					
Amendment / Reply		Petition Petition to conve	ert to a	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)							
After Final		Provisional Appl			Proprietary Information						
Affidavits/dec	Affidavits/declaration(s)		Power of Attorned Change of Corred Address			Status Letter					
Extension of Time R	Request		Terminal Disclai	mer		Other Enclosure(s) (please identify below):					
Express Abandonment Request			Request for Refu	nd							
Information Disclose	ure Statement		CD, Number of 0	CD(s)							
		1 70	<u></u>	Table on CD							
Certified Copy of Pr Document(s)	iority	[ Ren	marks			*					
Reply to Missing Pa Incomplete Applicat		•									
Reply to Miss	sing Parts					÷					
Under 37 CFF	₹ 1.52 or 1.53	9									
The Commissioner founder 37 CFR 1.16 an		_			ditional	fees or underpayment of fees					
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT											
Firm Name T	The Webb Law	Firm				•					
Signature	Signature Wing Hamiltonia										
Printed Name V	William H. Logs	sdon			,						
Date A	April 2, 2008			Reg. No.	22,132						
	CER	TIFICA	TE OF TRANSI	AISSION / MA	ILING	——————————————————————————————————————					
	correspondence i	is being rst class	electronically tran	nsmitted to the	USPTO o	r deposited with the United States sioner for Patents, P.O. Box 1450,					
Signature	Dance	Ru	incliaugh	<u></u>	*						
Typed or printed name	augh	Ü		Date	Date April 2, 2008						

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known										
FEE T	Application	Number	09/809,405											
·				Filing Date		3/15/2001								
For FY 2008				First Named	Inventor	Frank Rac								
Applicant claims small entity status. See 37 CFR 1.27				Examiner N	ame	Behrooz S								
TOTAL AMOUNT OF PAYMENT (\$) 970.00				Art Unit         2621           Attorney Docket         5327 - 010										
METHOD OF PAYMENT (check all that apply)														
	Check Credit Card Money Order None Other (please identify):													
Deposit Account Deposit Account Number: 23-0650  Deposit Account Name: The Webb Law Firm														
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)														
Charge fee(s) indicated below  Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee														
Charge fee(s) indicated below. Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  Charge fee(s) indicated below, except for the filing fee														
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.														
	FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)													
1. BASIC FILING,		the state of the s	and the second second second second second second			San	***************************************							
	FILING	G FEES	SEARCH	FEES E	XAMINA	TION FEES								
	<u>s</u>	mall Entity	<u>Sma</u>	ll Entity	Entity Small Entity									
Application Typ	e Fee (\$)	Fee (\$)	Fee (\$) F	<u>ee (\$)</u>	Fee (\$)	<u>Fee (\$)</u>		Fees P	<u>aid (\$)</u>					
Utility	310	75	510	255	210	105			.					
Design	210	105	100	50	130	65			4.					
Plant.	210	105	310	155	160	80	·							
Reissue	310	155	510	255	620	310	•							
Provisional	210	105	0	0	0	0								
2. EXCESS CLAIN	M FEES								Small Entity					
Fee Description							<u>]</u>	Fee (\$)	Fee (\$)					
Each claim over 20 (including Reissues) 50									25					
Each independent cla		uding Reissi	ies)					210	105					
Multiple dependent of		Evitua Cl	nima Food	e) For	Data (e)		M	370	185					
<u>Total Claims</u> -	<u>- 20 or HP</u>	Extra Cla	x Fee (	<u>s) ree</u>	<u> Paid (\$)</u>			<u>иниріе De</u> <u>Fee (\$)</u>	ependent Claims Fee Paid (\$)					
HP = highest number	of total claims pai	d for, if greater												
Indep. Claims	<u>- 3 or HP</u>	Extra Cla		( <u>\$)</u> <u>Fee</u>	<u> Paid (\$)</u>		***************************************							
HP = highest number	of independent cla	ims paid for, if	greater than 3.											
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Number of each additional 50 or fraction thereof  Fee (\$)  Fee Paid (\$)														
	00=			(round up to			-							
4. OTHER FEE(S)		\$130 fee (	no small entity of						Fees Paid (\$)					
Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): Notice of Appeal/Petition for Extension of Time 510 & 460														
								an an ann an air ann an						
SUBMITTED BY		/ //		Registra	tion No			iii aa						
Signature	gnature (Attorney/Agent) 22,132						Telephone 412-471-8815							
Name (Print/Type)	Name (Print/Type) William H. Logsdon							Date April 2, 2008						